



MT. WHEELER POWER

Application Date:		Date Service is to be Connected/Transferred:	Service Address:
Name of Primary Applicant:		Social Security #	Driver's License or ID #: State:
Mailing Address: City, State, Zip Code		Telephone # : Cell Phone #: Work Phone#: E-Mail:	Previous Address: City, State, Zip Code
Employer (If Self Please Explain):		Employer Address: City, State, Zip Code	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow If married, please complete below
Job Title:			
Name & Address of Relative Not Living with You City, State, Zip Code		Bank & Branch: City, State, Zip Code:	<input type="checkbox"/> Own <input type="checkbox"/> Rent Landlord:
Deposit Quote: \$ _____ Payment options: <input type="checkbox"/> Full Payment <input type="checkbox"/> 1/2 payment with 2 week promissory <input type="checkbox"/> Credit Check _____ (Initials) Payment type: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card		Two Forms of ID Required: <input type="checkbox"/> Drivers License <input type="checkbox"/> Social Security Card <input type="checkbox"/> Passport (serves as both) <input type="checkbox"/> Birth Certificate	
Additional Applicant: <input type="checkbox"/> Spouse <input type="checkbox"/> Reg. Partner <input type="checkbox"/> Co-Signer		Social Security #:	Driver's License or ID #: State:
Telephone # : Cell Phone #: Work Phone#:		Employer (If Self Please Explain): Job Title:	Employer Address:
ID Required for spouse (If applicable) <input type="checkbox"/> Drivers License <input type="checkbox"/> Social Security Card <input type="checkbox"/> Passport (serves as both) <input type="checkbox"/> Birth Certificate		Name & Address of Relative Not Living with You : City, State, Zip Code	
Have you or the additional applicant ever had service with Mt. Wheeler before? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'yes', what name was the account in?		Is Anyone in the home on Life Support? <input type="checkbox"/> Yes <input type="checkbox"/> No Name & Relationship:	

Everything that I have stated on this application is correct I (we) Authorize Mt. Wheeler to check my credit and employment history at any time it deems necessary.

APPLICANT SIGNATURE _____

CO-APPLICANT SIGNATURE _____

